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THADEWARK	DECLARATION FOR UTILITY OF
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Declaration
Submitted

PATENT APPLICATION (37 CFR 1.63)

PTO/SB/01 (12-97)

Approved for use through 9/30/00: OMB 0651-0032

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Attorney Docket Num	ber .
First Named Inventor	Tarhet
	TE IF KNOWN
Application Number	09/54/5,486
Filing Date	04/08/1999
Group Art Unit	1615
Examiner Name	

Declaration Submitted OR				
Cubmitted VI	Declaration Submitted after Initial	Group Art Unit	1615	
with Initial Filing	Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name		
As a below named invent	tor, I hereby declare that:			
and office s	address and dilizenship are as	stated below next to my n	ame.	
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names are listed below) of	first and sole inventor (if only or the subject matter which is cla ION AND METHOD F	OR THE TREAT	MENT OF	
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	and understand the Co	ontents of the above identive.	fied specification	i, including the claim of as
amended by any amendm	ent specifically referred to above disclose Information which is m	naterial to patentability as	defined in 37 CF	R 1.56.
hereby claim foreign prio	rity benefits under 35 U.S.C.	119(a)-(d) or 365(b) of ar	ny foreign applic	ation(s) for patent of alversor s
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[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120	of any United States a	pplication(s), or 365(c) of any P	CT internation	al application d	esignating to			
United States of America, listed below and, in United States or PCT International application information which is material to patentability as and the national or PCT International filing date	n the manner provided defined in 37 CFR 1.	by the first 56 which t	paragraph of 35 U.S	C. 112. I ack	nowledge the d	uty to disclos			
U.S. Parent Application or Number	PCT Parent		rent Filing Date MM/DD/YYYY)	Pa	rent Patent (if applica				
Additional U.S. or PCT International applica	ition numbers are listed	iqua a no t	plemental priority data	sheet PTO/S	B/02B attached	hereto.			
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Name	Registration Number		Nar	ne		Istration umber			
Kenneth H. Tarbet	43,181								
Additional registered practitioner(s) named o	n supplemental Registe	ered Pract	itioner Information sh	eet PTO/SB/02	2C attached her	eto.			
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ing the second section of the section o	er Number Code Label		OR	Correst	oondence add	iress below			
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city Woodinville		St	ate WA	_{ZIP} 98	072				
Country USA	Telephone (4	425) 4	85-2040	Fax (4	25) 485-9	910			
hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
Name of Sole or First Inventor:									
Given Name (first and middle [If any]) Family Name or Sumame									
Bryon J.		Tai	bet						
Inventor's Signature Cuf	Sen				Date				
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Additional inventors are being named or	n thesuppleme	ntal Addi	tional Inventor(s) s	heet(s) PTO	/SB/02A attac	hed hereto			